

FALL 2002

Alcohol, Tobacco and Other Drugs

Prevention File



■ A Roadmap for Progress
in DUI Prevention

■ Ireland Addresses Rising
Alcohol Consumption

■ Using the Internet for
Public Policy and Advocacy

I WANT TO QUIT, NOW!

Most young smokers worldwide—nearly 70 percent—said they want to quit immediately, according to the Centers for Disease Control and Prevention and the World Health Organization, which oversee the Global Youth Tobacco Survey, a worldwide effort to compile information on youth smoking. The survey looked at tobacco use among young people in 43 countries and the Palestinian Territories between 1999 and 2001.

It found that 14 percent of people ages 13 to 15 around the world smoke cigarettes, with nearly a quarter of them having tried their first cigarette by age ten.

The highest rates of youth smoking are in developing countries. In four countries—Chile, Russia, Ukraine and the Northern Mariana Islands—more than a third of students were found to be current smokers. In the United States, the report found nearly 18 percent of students ages 13 to 15 smoke, slightly above the worldwide average, and only 56 percent said they want to stop smoking.

GENDER EQUITY

Smoking is one area in which women have almost reached equality with men, according to a recent U.S. Surgeon General's Report on smoking and women. Twenty-two percent of women are cigarette smokers—near an all-time high—in part because of a tobacco-industry advertising campaign that has successfully targeted younger women.

"Women in former generations smoked at a rate lower than men," said Terry Pechacek, associate director for science in the Centers for Disease Control and Prevention Office of Smoking and Health. "Men smoked much more than women in the decades of the '40s and '50s. Women came to the addiction a little later than men did, because social restrictions kept women from smoking. Now women smoke almost as much as men."

The report says that social factors have a major effect on tobacco use by women. "Girls who initiate smoking are more likely than those who do not to have parents or friends who smoke. They also tend

to have weaker attachments to parents and families and stronger attachments to peers and friends."

They also have a positive image of smoking—which advertising has a lot to do with, Pechacek says. "The industry is spending a record amount of money promoting the behavior. In 1999, it spent \$9.3 billion promoting the product."

DRUG-FREE SCHOOLS AT LAST?

Achieving drug-free schools has been a long sought-after prevention goal. And now a majority of teens say their school is drug free, according to *The National Survey of American Attitudes on Substance Abuse VII: Teens, Parents and Siblings* from the National Center on Addiction and Substance Abuse at Columbia University.

The survey found that 62 percent of 12- to 17-year-olds in public schools say their schools are drug-free compared to 42 percent in 2000. This is the first time in the seven-year history of the survey that a majority of public school students are reporting drug-free schools. Parochial school students are also reporting increases in drug-free schools. Seventy-nine percent of students in parochial schools say their school is drug free, compared to 65 percent in 2000.

CASA says that teens who attend drug-free schools are at roughly half the risk of substance abuse as teens attending schools where drugs are used, kept or sold. But despite the increase in the number of schools that are drug free, 25 percent of students say they have personally witnessed the sale of illegal drugs on school grounds.

NINE LIVES AREN'T ENOUGH

Cats who live with people who smoke are more than twice as likely as other cats to develop a deadly form of cancer called feline lymphoma, according to a study by scientists at Tufts University School of Veterinary Medicine and the University of Massachusetts (*American Journal of Epidemiology*, Vol. 156, No. 3, Aug. 1, 2002).

The finding provides compelling evidence of the need for further study of the link between secondhand smoke and non-Hodgkin's lymphoma in humans, which is similar to lymphoma in cats, the study authors say.

"We believe the feline exposure patterns to environmental tobacco smoke may mimic those of young children living in households where adults smoke

and where the children inhale tobacco smoke or ingest particulate matter by mouthing contaminated objects," says lead author Elizabeth R. Bertone, ScD, an epidemiologist at the University of Massachusetts at Amherst.

WORKER BLUES

Blue-collar workers have a harder time quitting smoking than white-collar workers do, but researchers have found a new method that doubles the success rate for those who want to quit. According to a study reported in *Cancer Causes and Control* (August 2002), blue-collar workers are more willing to quit when they're taught about the risks of combining smoking with other common workplace hazards. More traditional workplace programs haven't been as successful with blue-collar workers.

The American Lung Association says that the risks of smoking on the job aren't just limited to cigarettes for blue-collar workers. Those workers are often exposed to chemicals that can become deadlier when combined with smoking. For example, asbestos workers who smoke dramatically increase their chances of dying of lung cancer. Blue-collar workers smoke far more than other workers do. A 1997 study found that 37 percent of male blue-collar workers and 33 percent of female workers smoked. For white-collar workers, just 21 percent of men and 20 percent of women smoked, says the study's lead author, Glorian Sorensen, PhD, a Harvard University professor and director of the Dana-Farber Cancer Institute's Center for Community-Based Research.

Sorensen says that the work environment is an ideal place to tackle health issues because the large majority of adults spend their time in a work setting.

"It's a place that shapes our behavior through social norms and the support you get from your co-workers. As we think about health, whether smoking or anything else, we need to think about how those individual factors are situated in the broad fabric of a person's life."

DRINKING POST-9/11

According to "A Changed America? The Effects of September 11th on Alcohol Consumption and Depression," a paper presented at the 2002 American Sociological Association Annual Meeting in Chicago, there was no significant increase in alcohol consumption in the three months following the

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A ROAD MAP FOR PROGRESS IN DUI PREVENTION

THE GOOD NEWS is that the number of alcohol-impaired drivers with a blood-alcohol level of 0.10 or above in fatal traffic crashes dropped by 37 percent from 1982 to 1994. The bad news is that through 1999 the numbers remained virtually unchanged. Even more disturbing is the 6 percent increase in 2000, the largest annual increase since 1986.

A study presented at the 16th International Conference on Alcohol, Drugs and Traffic Safety in Montreal, Canada, held in August 2002, investigated why alcohol-impaired driving in the United States

of drunk-driving laws, enforcement, courts and punishment, but these systems do not work as well as they should. Drunk drivers have little fear of being stopped, arrested, convicted and punished—so they continue to drink and drive,” they said.

Stimulated by the rise of the citizen activist groups such as RID—Remove Intoxicated Drivers—and MADD—Mothers Against Drunk Driving—alcohol-impaired driving became a national issue in the 1980s. In response to this increased public concern, states enacted per se administrative license revocation, mandatory



has not decreased recently and offers recommendations on what can be done to make further gains.

According to researchers Jim Hedlund, PhD, former associate administrator at the National Highway Traffic Safety Administration, and Anne T. McCartt, PhD, his colleague at the Preusser Research Group in Connecticut, public attention to drunk driving in the 1980s led to new laws, increased enforcement, and substantial decreases in alcohol-impaired driving casualties. But progress on all fronts slowed in the 1990s.

“By 2000, every state had an elaborate system

driver’s license suspension, and other laws. At the federal level in 1982 Congress established Section 408 grants that provided funds to states that implemented or already had in place certain drunk-driving control laws or programs. In 1984, Congress required all states to raise their minimum legal drinking age to 21.

The researchers point out that DUI improved with the use of accurate breath-test equipment and standard field sobriety tests. A number of states established DUI task forces to develop legislation and coordinate drinking-driving control activities.



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“Perhaps most important, the understanding grew that drunk-driving control requires a coordinated system, with all parts working together,” said Hedlund and McCartt.

But what happened to stall the progress being made against DUI? Hedlund and McCartt describe the current state of drinking and driving in the United States as follows:

- Drinking and driving is common. About 21 percent of driving-age Americans reported they had driven after drinking in the past year,
- DUI arrests are rare. With 1.55 million arrests for DUI in 1999, the chances of arrest on any drunk-driving trip were less than one in 50.
- Repeat offenders and drivers with high blood-alcohol levels contribute prominently to the problem. About one-third of all drivers arrested or convicted of DUI are repeat offenders. Over half of all drivers arrested for DWI and almost two-thirds of fatally injured drinking drivers had a BAC over 0.15.
- About 23 percent of all drinking drivers are problem drinkers, but they contribute to over 40 percent of all drinking-driver trips.



- States differ substantially. In some states, only about 10 percent of all drivers involved in fatal crashes had BAC levels over 0.10. In other states, over 25 percent did. States that have reduced DUI the most over the past 20 years have effective



- laws; high-visibility enforcement; and substantial public education built on a foundation of strong leadership, secure funding and firm commitment.
- Attention to drinking and driving has dropped. The public is more concerned with drugs and crime. Even within traffic safety, the spotlight is on aggressive driving, cell phone use, and tire defects rather than DUI.
- Many drinking drivers are not deterred. While most of the public supports DUI laws and enforcement, a substantial minority of drivers believes it is unlikely that they would be stopped, arrested or convicted if they drove after drinking too much.

What is needed? Hedlund and McCartt say that an improved DUI control system will ensure that alcohol-impaired drivers are consistently arrested, regularly convicted and appropriately punished. When everyone understands that driving under the influence brings frequent



and uncomfortable consequences, then fewer people will drive drunk.

“Research over 40 years has shown conclusively that good laws that are strongly supported and enforced with meaningful penalties reduce drunk driving. Three other strategies support this system. Public education informs drivers, especially young drivers, about alcohol and drunk-driving issues. Alcohol treatment is essential for problem drinkers. Alcohol-control

measures such as minimum legal drinking ages and alcohol-server training help reduce drinking in situations that may lead to drunk driving. With strong laws, enforcement, and punishment at the center, these strategies reinforce and promote a community standard that drunk driving is not acceptable,” the researchers said in their report.

According to Hedlund and McCartt research studies and interviews identified common

problems in drinking-driving control systems. “They do not occur everywhere but are frequent enough that all states and communities should consider them. Research and interviews also identified solutions to these problems.”

A list of problems and solutions included in the report is presented in the sidebar: ☐

DUI PROBLEMS AND SOLUTIONS

| PROBLEM | SOLUTION |
|--|--|
| State laws are complex and contain inconsistencies and loopholes. | Review and simplify laws. |
| Many drivers refuse to take BAC tests. | Establish BAC test-refusal penalties that are more severe than the penalty for failing the BAC test. |
| DWI enforcement levels and arrest rates are low. | Simplify arrest procedures and paperwork; provide needed equipment and training; enforce drinking-age and zero-tolerance laws. |
| Many arrested drunken drivers aren’t convicted. | Eliminate plea bargains to nonalcohol offenses; eliminate diversion programs that allow offenders to escape punishment; assure that administrative hearings don’t interfere with criminal proceedings. |
| Many repeat offenders are not identified. | Improve record systems to identify prior drunk-driving offenses. |
| Problem drinkers are not identified or treated effectively. | Screen all drunk-driving offenders for drinking problems; require treatment if needed. |
| Even convicted drunken drivers escape meaningful punishment. | Apply administrative and criminal sanctions consistently; include actions against the offender’s car. |
| Offenders frequently are not monitored to assure they complete their sentences. | Control offenders closely during probation; consider dedicated facilities if needed. |
| Offenders frequently drive with suspended licenses or fail to relicense when eligible. | Establish and enforce stiff penalties for unlicensed driving. |
| Law enforcement, courts and probation lack needed resources. | Provide steady, dedicated funding. |
| States need strong leadership for all drunk-driving control activities. | Assure that state transportation, health, law enforcement, motor vehicle and justice departments work together. |

A GRADUAL INTRODUCTION TO DRIVING

The problems contributing to these higher crash rates of young drivers include inexperience and lack of adequate driving skills; excessive driving during night-time, high-risk hours . . .

FOR MANY U.S. TEENAGERS the real meaning of “sweet sixteen” is that’s the day they get their driver’s

license and can start enjoying the freedom of the open road. But young drivers pose substantial risk on the nation’s roadways. According to the U.S. Department of Transportation’s National Highway Traffic Safety Administration a significant percentage of young drivers are involved in traffic crashes and are twice as likely as adult drivers to be in a fatal crash. Sixteen-year-old drivers have crash rates that are three times greater than those of 17-year-olds, five times greater than those of 18-year-olds, and twice those of 85-year-olds.

The problems contributing to these higher crash rates of young drivers include inexperience and lack of adequate driving skills; excessive driving during night-time, high-risk hours;

risk-taking behavior; poor driving judgment and decision making; drinking and driving; and distractions from teenage passengers.

NHTSA has been encouraging states to implement a graduated driver licensing system for over 20 years. It says that easing young drivers into the traffic environment through more controlled exposure to progressively more difficult driving experiences can reduce their traffic crashes. Such an entry-level licensing system prolongs the learning process for young novice drivers by giving them more time to learn all the complex skills required to operate a vehicle.

The program consists of three distinct stages, named by the type of license possessed at each stage: learner’s permit, intermediate (provisional) license, and full licensure. Young drivers are required to demonstrate responsible driving behavior in each stage of licensing





before advancing to the next. So far 31 states plus the District of Columbia have matched or exceeded the prescribed stages of a model GDL law (see sidebar) adopted by NHTSA, the Insurance Institute for Highway Safety, the National Transportation Safety Board and the National Safety Council.

But just how effective are these laws in reducing drinking-and-driving crashes among teenagers? A study presented at the 16th International Conference on Alcohol, Drugs and Traffic Safety in Montreal, Canada, held in August 2002, examined the impact of GDL programs in Canada and the United States on alcohol-related crashes. According to researchers Daniel R. Mayhew and Herb M. Simpson, PhD, of the Traffic Injury Research Foundation in Ottawa, every evaluation conducted to date has reported positive benefits overall, although evidence for the effectiveness of GDL in preventing alcohol-related crashes has been mixed.

The researchers, who examined the effectiveness of GDL in reducing the number of alcohol-related crashes in Ontario, Quebec, Michigan

and North Carolina, found a positive impact in Ontario and Quebec but not in Michigan and North Carolina. They say that several factors may explain this disparity. First, unlike the GDL programs implemented in Canada, most of the GDL programs implemented in the United States do not include a zero BAC restriction because zero tolerance was already in place in these states for several years. Any impact of GDL on alcohol-related crashes in Michigan and North Carolina would have been expected when the zero tolerance law was introduced and not when GDL was implemented.

Second, U.S. GDL programs and studies focus on the crash experience of teen drivers, typically those aged 16, who drive after drinking less often than older teens. Accordingly, alcohol-related crashes among 16-year-old drivers are relatively rare and it would, therefore, be difficult to detect a measurable effect. By contrast, GDL programs in Canada apply to all novice drivers, not just young ones, so a positive effect may be more likely when the zero BAC restriction applies to all novice drivers. Moreover, no zero-tolerance laws existed in Ontario or Quebec before implementation of the GDL program with the zero BAC restriction.

Another study presented at the ICADTS meeting in Montreal evaluates the effect of California's GDL provisions on alcohol-related crashes. In July 1998, California passed one of the United States' toughest graduated driver licensing laws. The teen licensing law covers all

young drivers less than 18 years of age and imposes stringent passenger restrictions. Provisional license drivers cannot drive any passengers under age 20 for their first six months on the road. It also restricts teens from driving between midnight and 5 a.m. for their first year. In addition to receiving a provisional license, teens are also required to hold an instruction permit for at least six months.

Researchers Steven A. Bloch, PhD, of the Automobile Club of Southern California, Hee-Choon Shin, PhD, and Susan N. Labin, PhD, of the Institute for Survey Research at Temple University, say that California's GDL showed sharp reductions in had been drinking crash rates of 16-year-olds, especially in comparison to crash rates for a control series of 19-year-old drivers.

But Mayhew and Simpson say that the reductions in alcohol-related crashes observed after GDL in Ontario and Quebec may, in part or totally, be accounted for by a pre-existing downward trend in alcohol-related crashes.

Young drivers are required to demonstrate responsible driving behavior in each stage of licensing before advancing to the next. So far 31 states plus the District of Columbia have matched or exceeded the prescribed stages of a model GDL law.

During the 1980s, the percentage of fatally injured 16- to 19-year-old drivers in Canada who tested positive for alcohol compared with a group of 36- 45-year-old fatally injured drivers consistently decreased. The trend, although less dramatic, continued in the 1990s. But there are also differences in the trends. There was a much more dramatic decrease in the prevalence of drinking among young driver fatalities—from 1982 to 1999, the percent of fatally injured drinking drivers aged 16-19 declined by 56 percent, compared to a 37 percent decline among fatally injured drinking drivers aged 36-45. A similar pattern occurred in the United States.

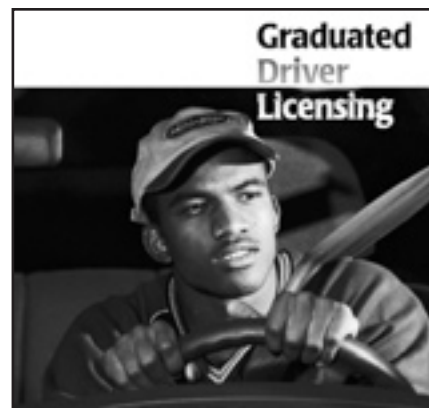
The researchers say that the experiences in Quebec, Ontario, Michigan and North Carolina suggest that GDL should only be expected to reduce alcohol-related crashes if the jurisdiction does not already have a zero BAC law and is now introducing one or if the program targets all novice drivers, not just those aged 16 and 17. And, studies on the impact of GDL should rule out the possibility that pre-existing trends account for all or some of the changes in numbers of alcohol-related crashes after GDL implementation. They say that given these issues, the specific impact of GDL on alcohol-related crashes is as yet unknown and needs to be pursued further. □

COMPONENTS OF A MODEL GRADUATED DRIVER'S LICENSE LAW

In the mid-1990s, the Insurance Institute for Highway Safety, the National Safety Council, the National Transportation Safety Board and NHTSA joined to establish a national model for graduated driver licensing. The three stages of the graduated licensing system they developed include specific components and restrictions to introduce driving privileges gradually to beginning drivers. Novice drivers are required to demonstrate responsible driving behavior in each stage of licensing before advancing to the next stage. Each stage has recommended components and restrictions for states to consider when implementing a graduated licensing system. Examples of components and restrictions of each stage include:

Stage 1: Learner's Permit

- State's minimum age for a learner's permit
- Pass vision and knowledge tests, including rules of the road, signs and signals
- Complete basic vehicle skills training
- Licensed adult (at least age 21) required in the vehicle at all times
- All occupants must wear safety belts
- Teenage passenger limitations
- Zero alcohol while driving
- Permit is distinctive from other driver licenses
- Must remain crash- and conviction-free for at least six months to move to the next stage.
- Parental certification of practice hours



Stage 2: Intermediate (Provisional) License

- Complete Stage 1
- State's minimum age
- Pass a behind-the-wheel road test
- Complete advanced driver education training (e.g., safe driving decision making, risk education)
- All occupants must wear safety belts
- Licensed adult required in the vehicle during late-night hours (e.g., night-time driving restriction)
- Zero alcohol while driving
- Driver improvement actions are initiated at lower point level than for regular drivers
- Provisional license is distinctive from a regular license
- Must remain crash- and conviction-free for at least 12 consecutive months to move to the next stage
- Supervised practice

Stage 3: Full Licensure

- Complete Stage 2
- State's minimum age
- Zero alcohol while driving



PUT A CORK

The danger associated with underage drinking and driving is compounded by a tendency to consume all of the alcoholic beverage available because it usually cannot be stored.

IN THE PURPORTED “BEER CAN INCIDENT” OF 1964, President Lyndon Baines Johnson was driving fast and threw a beer can out of his Lincoln Continental convertible as he showed guests around his cattle ranch along the Pedernales River. In fact, up until 2001 it was legal in Texas to drive on public roadways with an open container of alcohol in the passenger compartment of a vehicle.

While some states had long seen the folly of permitting drivers to have access to open containers of alcohol—as long as they weren’t “drunk”—others needed a nudge from the federal government in the form of financial incentives. The TEA-21 Restoration Act, signed in 1998, established a program to encourage states to enact and enforce open container laws that conform to a federal standard (see sidebar). The law required that a percentage of a state’s federal-aid highway construction funds be transferred for use in drinking-and-driving countermeasures programs, law enforcement, and hazard elimination if the state fails to enact and enforce a conforming open container law. According to Mothers Against Drunk Driving, currently 18 states do not have open container laws that are fully compliant with TEA-21.

A recent report from the National Highway Traffic Safety Administration assesses the highway safety effects of open container laws. According to the report, despite the significant improvements in traffic safety during the past two decades, an average of more than 115

people still die each day from motor vehicle crashes in the United States. In addition to the human costs, the economic losses from crashes are estimated to be more than \$150 billion annually, including \$19 billion in medical and emergency expenses, \$42 billion in lost productivity, \$52 billion in property damage, and \$37 billion in other crash-related costs. Approximately 40 percent of fatal crashes involve a drinking driver and 29 percent of the drivers who die in crashes have blood-alcohol concentrations (BACs) of 0.10 percent or greater.

NHTSA says that the enactment and enforcement of uniformly strong open container laws provides another potential means to help reduce drinking and driving and could lead to further reductions in the numbers of alcohol-involved crashes. While research on the relationship between open container laws and traffic safety is limited, there is evidence that, from a traffic-safety perspective, the most dangerous form of alcohol consumption is drinking in a vehicle. For example, a study of drivers who were arrested for DUI in San Diego, California, found that more than half of the violators had consumed alcohol in their vehicles soon after purchasing it from liquor stores, convenience stores, or gasoline minimarts (*Alcohol Health and Research World*, Vol. 12, No.1, 1987). The study found that the incidence of alcohol drinking in cars was nearly three times greater when the beverages were purchased at gas stations, compared to all other outlets.

IN IT

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Another study of DUI offenders in Santa Fe County, New Mexico, found that 37 percent of the offenders who bought package liquor prior to arrest bought their alcohol at a drive-up window, compared to 14 percent at a convenience/drug store. Further, the offenders who bought at a drive-up window were 67 percent more likely to have been drinking in their vehicle prior to arrest, and 67 percent more likely to be problem drinkers, than those who bought package liquor elsewhere (*Accident Analysis and Prevention*, Vol.30, No.6, 1998).

In addition to DUI offenders, according to the report, law enforcement officers report that underage youths exhibit a preference for drinking in vehicles. The danger associated with underage drinking and driving is compounded by a tendency to consume all of the alcoholic

beverage available because it usually cannot be stored. Other factors, including a lack of driving experience and skill, exacerbate this problem.

“The analysis of data from the first four states that enacted open container laws in 1999 in response to the TEA-21 Restoration Act, found that measures of alcohol-involvement in crashes appeared to decline during the six-month periods following the beginning of enforcement, compared to the same six-month periods one year earlier. The changes were in the direction expected if the laws have an impact; however, the differences were not statistically significant.

“Comparisons of crash data showed that states that lacked open container laws had significantly greater percentages of alcohol-involved fatal and single-vehicle crashes than



OPEN CONTAINER LAW CONFORMANCE CRITERIA

The regulations resulting from the TEA-21 Restoration Act specify six elements that state open container laws must include to conform to the federal standard and to enable a state to avoid the transfer of federal-aid highway construction funds. They are:

- A state's open container law must prohibit the possession of any open alcoholic beverage container and the consumption of any alcoholic beverage in the passenger area of any motor vehicle that is located on a public highway or right-of-way. However, state laws and proposed legislation that prohibit possession without prohibiting consumption also have been found to be in conformance with the possession and consumption criterion because in order to consume an alcoholic beverage, an individual must first have that beverage in his or her possession.
- The open container law must apply to the passenger area of any motor vehicle. "Passenger area" is defined as the area designed to seat the driver and passengers while the motor vehicle is in operation and any area that is readily accessible to the driver or a passenger while in their seated positions, including the glove compartment. Vehicles without trunks may have an open alcoholic beverage container behind the last upright seat or in an area not normally occupied by the driver or passengers.
- The open container law must apply to all alcoholic beverages. An "open alcoholic beverage container" is any bottle, can, or other receptacle that contains any amount of alcoholic beverage, and that is open or has a broken seal, or the contents of which are partially removed.
- The open container law must apply to all occupants of the motor vehicle, including the driver and all passengers. The statute provides for two exceptions, however, to the all-occupant requirement. A law will be deemed to apply to all occupants if the law prohibits the possession of any open alcoholic beverage container by the driver, but permits possession of alcohol by passengers in "the passenger area of a motor vehicle designed, maintained or used primarily for the transportation of persons for compensation" (e.g., buses, taxis, limousines) and passengers "in the living quarters of a house coach or house trailer."
- The open container law must apply to a motor vehicle while it is located anywhere on a public highway or the right-of-way of a public highway. The agencies have defined "public highway or the right-of-way of a public highway" to include a roadway and the shoulder alongside of it.
- A state must provide for primary enforcement of its open container law. Under a primary enforcement law, officers have the authority to enforce the law without the need to show that they had probable cause to believe that another violation had been committed. An open container law that provides for secondary enforcement does not conform to the requirements of the regulation.

the states with partially or fully conforming laws. Although the differences cannot be attributed with certainty to the presence or absence of open container laws, the results of the analyses suggest that conformance with some or all of the six elements of the federal requirements contributes measurably to traffic safety," the report concluded.

And states that enacted conforming laws in 1999 and 2000 in the aftermath of TEA-21 experienced the lowest proportion of alcohol-involved fatal crashes of the four categories of states assessed. Those categories are states that had conforming laws when the TEA-21 Restoration

Act was enacted; states that adopted fully conforming laws by October 1, 2000; states that had partially conforming laws by October 1, 2000; and states that had no open container laws at all as of October 1, 2000. That finding suggests that public consideration and subsequent adoption of proposed laws may increase awareness of the issues and lead to safety benefits.

The report says that perhaps equally important when considering whether such laws should be enacted is a national survey conducted by NHTSA finding that a substantial majority of the driving-age public supports open container laws and thus appears to recognize their value in contributing to traffic safety. ☐

The full report is online at www.nhtsa.dot.gov/people/injury/alcohol/OpenContainer/index.htm

Ireland Addresses Rising Alcohol Consumption

ALCOHOL CONSUMPTION IN IRELAND has gone up by over 40 percent in the last decade, the highest increase in the European Union, according to a recently published report by Ireland's Ministry of Health and Children. Micheál Martin, Ireland's minister for health and children, termed the increased consumption "dramatic," upon receipt of the *Interim Report of the Strategic Task Force on Alcohol* in May 2002.

This increase contrasts with a decline in consumption among ten of the EU countries during the same time period. For example, in 2000, alcohol consumption per adult in Ireland registered 14.2 liters of pure alcohol per capita. Meanwhile, across the EU, adult consumption was only 9.1 liters.

Leading this increase has been a 50 percent rise in use of distilled spirits and a doubling in consumption of hard cider, a product based on



TASK FORCE RECOMMENDATIONS

The National Alcohol Strategy Task Force appointed by Ireland's Ministry of Health and Children offered these recommendations aimed at lowering per capita consumption and reducing the harm that consumption causes:

1. Ireland must reduce per capita consumption by regulating availability through
 - Increasing taxes
 - Health Boards intervening on public health issues regarding licensing
2. Ireland must drastically reduce road accidents through
 - Random breath testing
 - Reducing the minimum blood-alcohol level to 0.50 (Ireland and the UK are the only EU countries at 0.80)
3. Ireland must limit harm in the drinking environment by
 - Enforcing the law preventing publicans from serving those already intoxicated
 - Restricting sales promotions that encourage high-risk drinking (promotions like happy hours and two-for-one deals)
4. Ireland must protect children from alcohol consumption by reducing their exposure to marketing by
 - Limiting advertising
 - Banning alcohol sponsorship of children's activities ☐

Editors note: As alcohol marketing is an increasingly global proposition, and as public health and safety officials—with support of nongovernmental organizations—are collaborating in research, problem surveillance and policy formation, Prevention File will continue to report on developments from other countries that may have relevance for our largely U.S.A. based readership. See Prevention File, Vol. 17, No. 3, Summer 2002 and Vol. 16, No. 3, Summer 2001.

fermented apple juice and carrying an alcohol content of between 5 and 8 percent, midway between beer and wine.

"Ireland's increase in consumption is directly related to a continuum of current problems, ranging from accidents and unprotected sex to chronic illness," according to the report. It noted that alcohol was a factor for one in four visits to hospital emergency departments. Public disturbances, mostly all alcohol-related, jumped nearly 100 percent between 1996 and 2000.

"[T]he all-pervasive presence of alcohol, on billboards, on television, at major social and sporting events," has prompted Ireland to re-examine its alcohol policies, Martin said at the announcement of the National Alcohol Strategy Task Force's establishment in November 2001.

To respond to increasing consumption and problems the task force report called for control of availability through tax increases and licensing regulations, changes in driving laws to reduce impaired driving, deterrence of high-risk sales and service practices and protection of children from alcohol advertising

"The drinks industry was represented on the task force and issued a 'minority' report which ran contrary to the report's findings," reported *The Irish Times*, the day following release of the task force report.

The drinks industry says that the view that reductions in overall consumption of alcohol will lead to a reduction in alcohol-related harm is an incorrect one. According to its minority report, the industry is concerned that this "flawed position" has led to certain proposals being adopted, which, it strongly believes, will have little or no material effect on the issue

A collage of black and white images related to Guinness Extra Stout. The collage includes: a person drinking from a bottle; a bottle of Johnnie Walker; a glass of ice cream; a Guinness can; a glass of Guinness with a harp logo; a band performing; a castle; and a large circular Guinness Extra Stout label.

The minority reports says “the Drinks Industry Group welcomes many other actions proposed by the Task Force but is disappointed that greater emphasis has not been placed on substantially increasing educational programs aimed at securing a better understanding of the proper use of alcohol particularly amongst at risk groups. It has consistently indicated that it is prepared to play a significant role in such activities.”

FALL 2002 PREVENTION FILE 13

LAYING DOWN THE LAW TO PARENTS ... IN OHIO

THE ALL-TOO-COMMON PRACTICE OF PARENTS PROVIDING ALCOHOL at teenage parties led Ohio Parents for Drug Free Youth to develop a public awareness campaign *Parents Who Host, Lose The Most, Don't be a party to teenage drinking*. This slogan is not just a clever phrase but also a warning to parents not to serve alcohol at their teens' parties.

Parents Who Host, Lose The Most is an annual public awareness campaign that takes place on both local and statewide levels. It runs April through early June, during prom

and graduation season when the number of teen house parties alcohol is available increases. The goal of the campaign is to inform parents that hosting teen drinking parties should not be regarded as a rite of

passage but as a health and safety problem with legal ramifications.

Parents who knowingly allow a person under age 21 to remain on their property while consuming or possessing alcoholic beverages can face a maximum sentence of six months in jail and/or a \$1,000 fine in Ohio. Other states have similar laws.

The campaign has spread nationwide since

its inception in 2000. Ohio Parents for Drug Free Youth has received requests for materials and implementation assistance from 21 states. *The Parents Who Host, Lose The Most* campaign recently received recognition with a 2001 National Exemplary Promising Practice Award from the U.S. Center for Substance Abuse Prevention. It was one of five programs listed in the "promising practices" category.

Parents often look the other way when it comes to teen drinking, particularly during prom and graduation season when their children celebrate special moments in their lives. It is not unusual for well-meaning parents to provide alcohol to their teen's friends at house parties and take away their car keys. Although they are attempting to keep them "safe" from drinking and driving, this promotes a very mixed message about the legality and normalcy of alcohol use by teens. Nevertheless, such parties have become acceptable in many communities. A June 2001 survey of 3,000 households in Ohio found a high prevalence of teen house parties at which alcohol is available. According to the survey, which was conducted by Miami University's Applied Research Center, both teens and parents know that parties are going on. Forty-two percent of parents and 49 percent of youths say they know of parents who host teen alcohol parties. Thirty-nine percent of youths said that they



Forty-two percent of parents and 49 percent of youths say they know of parents who host teen alcohol parties.



have attended a party where alcohol is served to underage youths.

Close to 65 percent of parents and almost 60 percent of youths said that it is generally easy for underage youths to get alcohol. When asked where youths get their alcohol, both parents and teens listed the following sources in descending order:

- Friends buy or provide it
- Older adults buy it for them
- Parents buy or provide it
- Local convenience stores
- Drive-through alcohol outlets

“Communities set the boundaries for acceptable social behavior. If we are to prevent alcohol use by children, parents must band together to create social norms that reinforce the anti-drug messages from home and school,” says Hope Taft, first lady of Ohio, who is the spokesperson for the campaign.

Parents often cite two misguided reasons for hosting parties at which alcohol is served. First,

they believe it is safer for kids to drink at home. Parents believe this option will reduce the risk of their child drinking elsewhere and then driving home. Second, when parents were asked in focus groups why they think some parents host parties at which alcohol is available, they said that they host teen parties in order to make their child popular or to be viewed as a “cool” parent.

However, the majority of both parents and youths say that they support the underage drinking laws in Ohio and believe that strict enforcement of these laws would stop parents and other adults from hosting parties at which alcohol is available to underage youths. Forty percent of parents and 48 percent of youths feel that the enforcement of underage drinking laws is lenient in their community. At least half of the surveyed parents believe that if adults knew of the underage drinking laws in Ohio, it would prevent parents from hosting underage alcohol parties. Ninety-one percent of parents and 89 percent of youths strongly agree that the use of advertising



to educate parents and youths about the dangers of underage drinking is helpful.

The *Parents Who Host, Lose The Most* campaign supports increased enforcement of underage drinking laws and advertising to change this social norm. Campaign materials contain information on the Ohio underage drinking laws and the Ohio Department of Public Safety's 877/4-MINORS telephone number that people can call to report underage drinking, including the provision and sale of alcohol to minors.

"We are proud to be in a partnership with the *Parents Who Host, Lose The Most* campaign in heightening the public's awareness on the criminal and health and safety aspects of providing alcohol to teenagers at house parties," says Ed Duvall Jr., deputy director of the Ohio Department of Public Safety Investigative Unit.

The campaign reaches parents by placing media ads and materials where parents purchase alcohol, as well as where they work and shop. Parents also get the campaign's message through radio and television public service announcements statewide.

On a local level, free campaign kits have been distributed to over 3,000 representatives across Ohio annually. The kit includes reproducible artwork materials, posters, fact sheets, fact cards and sample press materials. Participating communities are encouraged to work with schools, law enforcement agencies and local businesses to reproduce the campaign kit materials for dissemination and add their own logo when appropriate.

Community involvement is important to the campaign promotion. Thirty-nine of Ohio's 88 counties received funding in 2002 to promote the campaign locally. In Seneca County, community organizers placed cling-on stickers with the campaign logo in schools, public buildings and businesses. The county sheriff sent a letter to parents of high school students reminding them about the Ohio underage drinking laws. The organizers got the campaign message out on billboards and posters as well as in newspaper advertisements and public service announcements on cable television.

The Parents Who Host, Lose The Most


**Together, we
are helping
parents make
better decisions
by making them
aware of their
responsibility
to protect
themselves and
their teens by
hosting safe,
alcohol-free
parties for
youths.**

campaign offers the opportunity to link with partners to better promote the campaign message.

Thirteen statewide corporations have partnered with Ohio Parents for Drug Free Youth to get the *Parents Who Host, Lose The Most* message to their customers and employees. Participating corporations include large manufacturers, grocery stores and pharmacy chains, convenience stores and insurance companies. Speedway SuperAmerica, LLC, convenience stores placed static cling-on stickers with the campaign logo on their beer coolers. CVS/pharmacy displayed campaign fact cards in their stores at counters and distributed them as bag stuffers. Over 2,000 stores participated in Ohio, each reaching thousands of employees and customers.

This partnership extends to all law enforcement agencies in Ohio, including police departments, sheriff departments, juvenile courts and liquor control. Enforcement agencies are strongly involved with *Parents Who Host, Lose The Most* by disseminating materials and even promoting campaign messages on local billboards.

“The partnership of Ohio Parents for Drug Free Youth with corporations, enforcement agencies, state departments and grassroots organizations has resulted in the overwhelming success of the campaign. The response has been outstanding. Together, we are helping parents make better decisions by making them aware of their responsibility to protect themselves and their teens by hosting safe, alcohol-free parties for youths,” says Patricia Harmon, executive director of Ohio Parents for Drug Free Youth.

Parents Who Host, Lose The Most is a program of Ohio Parents for Drug Free Youth, a private, nonprofit, statewide organization that provides leadership and fosters networks in order to promote safe and drug-free communities. The campaign operates under the Office of Juvenile Justice and Delinquency Prevention, Enforcing Underage Drinking Laws Initiative, with a grant from the Ohio Department of Alcohol and Drug Addiction Services. For information call 614/540-9985 or visit www.ohioparents.org. 

SAVE THE DATE

The U.S. Department of Education's 16th Annual National Meeting on Alcohol and Other Drug Abuse and Violence Prevention in Higher Education

Reaching New Heights: Building Partnerships for Comprehensive Prevention

Thursday-Sunday, November 21-24, 2002
Seattle, Washington

www.edc.org/hec/natl/2002



Building Bridges between Research and Practice

USING THE INTERNET

For Public Policy and Advocacy

HOW CAN PUBLIC HEALTH ADVOCATES COUNTERACT THE INFLUENCE of corporate lobbying and campaign contributions?

Are there ways to offset the intimate political relationships built up over the years by special interests with members of Congress and the administration?

What about the voice of the populace?

How can the opinions of ordinary people be communicated to elected officials in a meaningful way?

The World Wide Web—and its capacity to marshal an outpouring of advocacy from a large number of constituents—provides one answer, according to Sarah DiJulio with M&R Strategic Services, a Washington, D.C.-based consulting firm. She

spoke on ways the Internet can support public health advocacy at the 24th Annual Substance Abuse Librarians and

Information Specialists (SALIS) Conference convened in Washington, D.C. in April 2002.

DiJulio pointed to the DontPardonBig Tobacco.org Website sponsored by the Campaign for Tobacco-Free Kids as an example of Web-based advocacy. The Website, which was launched in June 2001, called for people to “tell President Bush not to fall for Big Tobacco’s PR stunts.” It posted an e-mail letter (see sidebar) urging President George W. Bush to support Department of Justice action to hold tobacco companies liable for past advertising practices. Over 30,000 members took advantage of this opportunity to voice their opinion on pursuit of the federal tobacco settlement agreement.

The public learned about the Website through news accounts in the general media, especially in *USA Today* and on MSNBC. In addition, the Website was promoted by allied health organizations, such as the American Lung Association, and in paid newspaper advertising.

Did this large volume of public advocacy work?

Yes, said DiJulio, who told the SALIS conference that a shift in the administration took a more aggressive stance in prosecution of the tobacco settlement following receipt of letters generated from the Website. Soon after the first big salvo in summer 2001, the U.S. Department of Justice announced its decision

LET THEM KNOW WHAT YOU THINK

Dear Mr. President:

Don't let Big Tobacco off the hook. I urge your administration to aggressively pursue the government's lawsuit against the tobacco industry. Please say no to special protection for Big Tobacco and give the American people their day in court.

In another scheme to fool the American people, Philip Morris is trying to escape responsibility for the harm their products cause by changing their name. Don't fall for the PR stunts of an industry that has deceived and endangered the American people for decades.

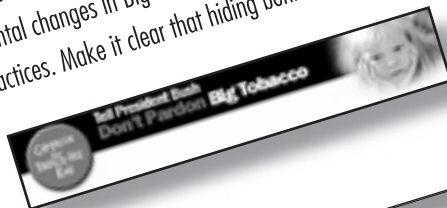
President Bush, please fully fund the lawsuit and don't settle for anything short of fundamental changes in Big Tobacco's harmful marketing and manufacturing practices. Make it clear that hiding behind a new name won't help.

Sincerely,

Your Name

Your Street Address

City, State Zip





to fully fund and staff the then pending legal action and—more importantly, DiJulio said—the administration threw its support in favor of a Congressional budget recommendation to pursue litigation.

Additionally, the campaign realized a number of other successes from its online advocacy feature, including:

- 24,000 new activists—members of the public previously not involved in tobacco-control advocacy
- Ongoing public and media education, as evidenced by the widespread coverage in the general media
- Support for state campaigns to continue their tobacco control actions. For example, in Florida a similar health advocacy Website enabled the public to register their voices on policy issues
- The Campaign for Tobacco-Free Kids receipt of funding from the Robert Wood Johnson Foundation and other philanthropies

The DontPardonBigTobacco.org Website is hosted on the Campaign for Tobacco-Free Kids Website that also features related news on state, federal, and international tobacco control developments, an archive of cigarette ads, and a special Mission Possible section for adolescents. ☐

BOOZE NEWS—ON THE WEB

At the Center for Science in the Public Interest's Website at www.cspinet.org alcohol policy advocates have a Web-based resource to support their efforts to focus public and policy-maker attention on high-leverage policy reforms to reduce the adverse health and social consequences of drinking.

CSPI launched its Alcohol Policies Project in 1981. Since then, the project has worked



with thousands of organizations and individuals to promote a comprehensive, prevention-oriented policy strategy to change the role of alcohol in society. And many of these efforts take place on the Internet. Visitors to the CSPI Website who click on Booze News find themselves faced with an array of information, strategies, alerts and resources to advance alcohol policy initiatives, most recently a "Take Action" item on the Office of National Drug Control Policy's relationship with NASCAR, the professional auto-racing association.

The August 23 "Take Action" posting asks advocates to urge ONDCP director John Walters to drop its collaboration with NASCAR in light of its \$7.5 million sponsorship deal with Busch Beer and the fact that other drivers have their own lucrative sponsorship deals, such as Rusty Wallace with Miller Brewing Co. and Sterling Martin with Coors. It provides advocates with background information on the issue as well as a sample letter to send to Walters.

An "Action Alert" posted in June 2002 shows people how to ask their Congressional representative to sign a "Dear Colleague" letter calling for a congressional hearing on the impact of television alcohol advertising on children. In addition to providing background information on the issue, the alert includes a sample letter that people can copy into an e-mail or fax to representation as well as a link to the manager of federal relations for CSPI Alcohol Policies Project for additional information.

In addition to action alerts, the project posts press releases, issues papers and fact sheets on current alcohol policy initiatives. Advocates can also sign up to receive updated information on alcohol policy initiatives from CSPI via fax transmission.

SAVE THE DATE

Preventing Alcohol Problems Among Youth: Policy Approaches

Thursday-Saturday, March 13-16, 2003
Boston, Massachusetts, USA

www2.edc.org/alcoholpolicy13

This is the 13th in the Alcohol Policy conference series, historically a forum for researchers, community advocates, and public officials to exchange ideas, explore evidence-based solutions, and consider the application of nonpartisan analysis and research findings to laws and policies aimed at minimizing risks associated with alcohol use.



Continued from inside front cover

terrorist attacks on September 11th.

In addition, their study found a significant increase in depression in the immediate two weeks after the attacks; but in subsequent weeks, levels of depression return to pre-September 11th levels.

The paper's authors, Hannah Knudsen, PhD, Paul Roman, PhD, and J. Aaron Johnson, PhD, point out that following the terrorist attacks, social commentators argued that America had profoundly

changed. In light of these arguments as well as the literature on the impact of disasters and trauma, they examined the mental health consequences of September 11th on a nationally representative sample of American adults who work on a full-time basis.

WHAT'S SO FUNNY ABOUT DRINKING?

What can comic strips tell us about America's attitudes toward alcohol use? A lot, as it turns out, says Robert A. Brooks, a doctoral student at American University, in a paper presented at the 2002 American Sociological Association Annual Meeting in Chicago.

Brooks analyzed all 151 comic strips that appeared in *The Washington Post* from 1961 to 1999 and found that gag lines played off alcoholic drinks more than any other beverage (coffee was a distant second on the list). In all, references to alcohol showed up in 126 of the 151 comic strips studied—with nearly two-thirds of the total appearing in just 15 strips. The heaviest user of alcohol gags by far was "Andy Capp" followed by "Hagar the Horrible," which remains a staple of that paper's daily and Sunday comics pages.

Brooks found that on a typical day in the study period, alcohol use was depicted or implied (either by the presence of liquor or references to an obviously inebriated character) in about 6.4 percent of the strips.

"However, there was marked variation across the years," Brooks said. "In 1961, alcohol content

appeared in approximately 3 percent of the sample strips. In subsequent years, alcohol content increased until it peaked [at about 7 percent] in about 1983, then steadily decreased to return in 1999 to almost exactly the same level as in 1961."

In addition, the way alcohol was portrayed in the funnies varied over time. In the 1960s the comics stigmatized drinking, with frequent drinking by villainous characters and high-society drinking often portrayed in the dramatic comics. In the 1970s the funnies emphasized the singles scene and drinking in clubs, and drinking was more frequently portrayed humorously. The 1980s portrayed middle-class drinking more commonly and foreshadowed a new temperance movement toward drinking. In the

1990s drinking representations declined, reflecting the influence of the new temperance movement. Brooks says that in comparing representations of alcohol in the comics to overall U.S. consumption patterns, there was a marked similarity in trends.

"Depictions of alcohol in the comics rose and fell in a similar pattern to actual U.S. alcohol consumption over the 40-year period; however, the decline in depictions of alcohol content lagged behind the decline in alcohol consumption rates, perhaps suggesting that comic strips are more reflectors of societal norms than influencers of them."



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Ten Years Ago in *Prevention File* (Vol. 7, No. 4, Fall 1992)

WHO'S BEHIND THE WHEEL?

One popular response to the problems of drinking and driving is the designated driver—the person in the group who drinks only nonalcoholic beverages and drives the others home. It's a simple idea that has received widespread publicity and the support of Mothers Against Drunk Driving, among others. Some bars even offer free or reduced-price drinks for designated drivers. But some critics are concerned that designated-driver programs detract attention from other alcohol-related problems and may themselves promote higher levels of drinking by the non-drivers.

In *The Case for Designated Drivers: A Primer*, Jay A. Winsten, PhD, director of the Harvard University Alcohol Project, says designated-driver programs have developed a wide acceptance and popularity in the United States. A 1991 Roper poll reported that 71 percent of the population believed that using a designated-driver is an “excellent” idea. The National Highway Traffic Safety Administration cited the use of designated driver programs as an important contributing factor in the decline of drunk driving fatalities to a new low in 1990.

But enthusiasm for designated drivers is not universal. William DeJong, PhD, also from Harvard, contends that the attention

and publicity focused on designated-driver programs deflect attention from other problems, which account for the majority of deaths and injuries associated with alcohol use.

“Having a designated driver does not protect you from home fires or homicides or domestic violence or any of the other health-related problems we know are associated with alcohol use,” said DeJong at the national conference *Alcohol Policy VII* in Washington, D.C. He asserted that not only do designated-driver programs erroneously present drunk driving as the major alco-

hol-related problem; they also distract people from other policy initiatives “that would help change the social, legal and economic environment in which we live and in which alcohol is consumed.”

DeJong also criticized designated-driver programs for possibly encouraging a driver's passengers to drink even more alcohol than they would otherwise.

“There are anecdotal accounts in the literature describing this phenomenon, but the fact is that there is no evidence one way or the other.

That also means there is no evidence showing that designated-driver programs are doing more good than harm—the research simply hasn't been done,” he said.

Editor's note: Public attention to drunk driving in the 1980s led to new laws, increased enforcement and substantial decreases in drunk-driving casualties. But progress on all fronts slowed in the 1990s. And DUI fatalities increased by 6 percent from 1999 to 2000. See “A Road Map for Progress in DUI Prevention,” on page 2 for more information.

